## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 or <u>Fax</u> (571)-273-2885

NSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 5 should be completed where proporties All further corresponders including the Patent, advance orders and notification to maintenance fees the mailed to the current corresponders address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for saintenance fee notifications.

INSTRUCTIONS: This appropriate. All further indicated unless corrects maintenance fee notifica	ed below or directed oth	for tran	smitting the ISSU Patent, advance of in Block 1, by (a	JE FEE and PUBLI rders and notification a) specifying a new of	CAT of corre	TION FEE (if requ maintenance fees v espondence address	ired). I vill be : and/or	Blocks 1 through 5 st mailed to the current (b) indicating a sepa	ould be completed correspondence addresses "FEE ADDRESS	where ess as S" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)						Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.					
Theodore W O		/2011				Cer	tificate	of Mailing or Trans	mission		
Theodore W Olds						creby certify that th	is Fee(	s) Transmittal is being	deposited with the U	Inited	
Carlson Gaskey & Olds Suite 350 400 W Maple Road						tes Postal Service v Iressed to the Mai asmitted to the USP	vith suf Stop TO (57	s) Transmittal is being ficient postage for firs ISSUE FEE address 1) 273-2885, on the da	t class mail in an env above, or being facs te indicated below.	elope simile	
Birmingham, M						(Depositor's					
					L				(Sign	nature)	
					L					(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVE		TOR ATTORN		RNEY DOCKET NO.	CONFIRMATION NO	D.		
10/561,559	12/19/2005			Jae-Hyuk Oh	60,469-241; OT-5178 LAB				9936		
TITLE OF INVENTION: ELEVATOR ACTIVE SUSPENSION UTILIZING RESPULSIVE MAGNETIC FORCE											
APPLN. TYPE	SMALL ENTITY	IS	SUE FEE DUE	PUBLICATION FEE I	OUE	PREV. PAID ISSU	E FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO		\$1510	\$300		\$0		\$1810	12/22/2011		
EXAMINER			ART UNIT CLASS-SUBCLAS		s						
KRUER, STEFAN			3654	187-409000							
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SBI 22) attached.  "Fee Address' indication (or "Fee Address" Indication form PTO/SBI 47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				2. For priming on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered patent attorneys or agents. If no name is listed, no name will be printed.							
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no saignee data will appear on the putent. If an assignee is identified below, the document has been filed recordation as set forth in 37 GR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  Otis Elevator Company  Farmington, CT									nd for		
Please check the appropriate assignee category or categories (will not be printed on the patent):											
4a. The following fee(s) are submitted:  1 gsue Fee  2 Publication Fee (No small entity discount permitted)  Advance Order - # of Copies				b. Psyment of Fec(s): (Please first reapply any previously paid issue fee shown above)  \[ \begin{align*} \text{ check is enclosed.} \\ \begin{align*} \text{ Psyment by credit card. Form PTO-2038 is attached.} \\ \text{ Director is hereby authorized to charge the required fixed), any deficiency, or credit any overpayment, to Deposit Account Number \end{align*} \text{ To Provide and extra copy of this form).} \]							
5. Change in Entity Stat	rus (from status indicated			□ b. Applicant is no	o lon	nger claiming SMA	LL ENT	ITTY status. See 37 CI	R 1.27(g)(2).	_	
NOTE: The Issue Fee and interest as shown by the r										rty in	
Authorized Signature Typed or printed name	Dav	3	Gaskey			Date* Registration N	ło	10-31-11 37,139			
This collection of informa an application. Confident submitting the completed this form and/or suggests Box 1450, Alexandria, V Alexandria, Virginia 223 Under the Panerwork Rec	ation is required by 37 C iality is governed by 35 application form to the ons for reducing this but irginia 22313-1450. DO 13-1450.	FR 1.3 U.S.C. USPT den, sh NOT S	11. The informatic 122 and 37 CFR O. Time will vary tould be sent to the SEND FEES OR C	on is required to obtain 1.14. This collection depending upon the e Chief Information C COMPLETED FORM spond to a collection of	n or is es indiv Offic IS To	retain a benefit by t timated to take 12 r vidual case. Any co or, U.S. Patent and O THIS ADDRESS formation unless it	he publ minutes mment Traden SENI	ic which is to file (and to complete, includin s on the amount of tin ark Office, U.S. Depa of TO: Commissioner in s a valid OMB control	by the USPTO to prog gathering, preparing the you require to con- rtment of Commerce, or Patents, P.O. Box number.	g, and aplete P.O. 1450,	